

Learning Conversation Notes	
<b>Name of Partner:</b>	<b>Date:</b>
North Tahoe Family Resource Center	December 12, 2007
<b>Conversation Participants:</b> Jacqui John, NTFRC; Florencia Tagliani, NTFRC; Ana Dorras, NTFRC; Alicia Stammer, First 5 Facilitator; Dennis Jennings, TOP Facilitator (visitor); Cathy Ferron, First 5 Evaluator; Don Ferretti, First 5 Evaluator; Melanie Cleary, First 5 Commissioner; Nancy Baggett, First 5; Mariela Ramirez, NTFRC; Maria Bernal, NTFRC; Patty Ahsoak, NTFRC; Barbara Hopkins, Sierra Family Services; Patrick Bollinger, Sierra Family Services; Sarah Coolidge, NTFRC; Molly Messerly, Project MANA	
<b>Outcome:</b> Children prenatal through 5, whose parents/caregivers receive services from North Tahoe Family Resource Center (NTFRC), are safe, healthy and well-nourished.	
<b>Performance Measures:</b> <ul style="list-style-type: none"> <li>• Demographics</li> <li>• Early Childhood Outcome Screens</li> <li>• Preventative Health Form</li> <li>• Parent Survey</li> </ul>	
<b>Number of Children Served:</b> 145	
<b>When served:</b> 7/1/07-11/15/07	
<b>Gender:</b>	
- Male	58
- Female	72
- Unknown	15
<b>Ages:</b>	
- Prenatal	15
- < 1 year	35
- 1 year	21
- 2 years	21
- 3 years	23
- 4 years	18
- 5 years	12
- Less than 3 years	92
- 3 to 5 years	53
- Unknown	
<b>Ethnicity:</b>	
- Alaskan Native/ American Indian	1
- Asian	
- Black/African American	
- Hispanic/Latino	143
- Pacific Islander	
- White	
- Multiracial	1
- Other	

## What is this data telling us about achievement of outcomes?

### Demographics

#### *Children*

- Of the 145 children served, 56 were continuing, 74 were new and 15 were prenatal (pregnant moms)
- There were a lot of infants and pregnant moms served
- Majority of the children served are < 3 year olds
- There is an even spread across the ages, with the exception of the <1 year olds
- Parents with children 0-5 yrs are receiving services
- NTFRC successfully reached the 0-3 yrs audience which is the most important time during brain development
- There is an increase in the numbers of male children participating in the program since the last learning conversation
- Mainly serving Latino children and families – this is also reflected by the Spanish speakers at home
- There are a low number of Caucasian children being served compared to the demographic number of Caucasian families living in the community. NTFRC has struggled with bringing Caucasian families into the program – is there a possible belief in the community that the program is only for Latino families?
- Please see attachment for special needs data
- The number of special needs children being served is a little lower than the county average – this may be due to lack of reporting and/or identifying special needs for children <3 yrs
- Please see attachment for regional data
- Region Served: 1 Carnelian Bay, 2 Tahoma, 130 Kings Beach, 12 Tahoe Vista -most families that don't live in Kings Beach hear about the NTFRC through word of mouth. There is a need to have more effective outreach to the broader North Tahoe community.

#### *Parents*

- Please see attachment for the parent demographic data
- There is an increase in male participants in the program
- In general, this is a younger group of parents with a younger group of children
- It looks like most families have multiple children
- Majority of parents served were from Kings Beach

### Early Childhood Outcome Screens

- Please see attachment for Outcome Screens data
- 27 children were receiving comprehensive case management services and had both a 1<sup>st</sup> and last screen (8 males and 19 females). The average age served was 2 years and 3 months – the age range was between 1 month to 5 years and three months
- As a group, the group came in with high scores (4 & 5's)
- In general, if a child had a score of 3 or lower on indicator #1, their other indicator areas also seemed to be lower
- Of the 12 that scored the lowest level for Safe Indicator #1 (3 or lower) all of the children increased their scores to 4-5 after receiving services – this demonstrates that they are being assessed as feeling safer
- For Indicators #17-20 - informal support networks are the hardest areas to engage parents in. When parents come to the NTFRC in crisis, they are not concerned about support networks and positive parenting until after they are out of crisis. When parents

enter the NTFRC, the most immediate impact you can have is in the child's status and then work with the indicators related to the parenting components.

- For Indicator #6, 7 children came in with a score of <3 (two scored 2's, five scored 3's), at the last screen all children increased their scores above the true line (six scored 4's, one scored a 5). All these children received resources, such as WIC and Project MANA. This implies that these 7 children were able to improve their nourishment which supports the overall outcome.
- For Indicator #5, two scored 2's, four scored 3's and twenty-one scored 4 & 5's.
- For Indicator #3, four scored 1's, five scored 3's, eighteen scored 4 & 5's. 15 stayed the same (remained 5's), 11 improved their scores and 1 declined. This demonstrates that the children are safer which supports the overall outcome.
- For Indicator #17, two scored 2's, fifteen scored 3's, seven scored 4's, three scored 5's. There seems to be the least amount of movement of the examined data sets. This could be due to the fact that these parents have very basic health and safety needs. NTFRC's approach is to respond to the immediate need first, then after building trust and relationship with the parents, help them engage in some level of informal support networks and parenting education and training. But in general, there is an increase in the overall scores and the parents are moving in a positive direction.
- For Indicator #11, two scored 1, two scored 2's, 5 scored 3's, seventeen scored 4 & 5's – after receiving services all children improved except for four who declined because domestic violence in the home was identified.
- For Indicator #12, all the children improved their scores and are heading in the right direction
- Overall, of the 27 children that were assessed, most (with the exception of a few) showed improvement and growth which supports the overall outcome. Most of these 27 children came in doing fairly well (scored 4's & 5's) which implies that families are coming in at a higher level. This could be due to the fact that families have received previous NTFRC or community services to meet their basic needs or that they are coming in for enrichment activities.
- NTFRC is serving families who are not necessarily in crisis and are focusing on prevention and enrichment activities – working with families who are doing well and help them to do even better.

### **Preventative Health Form**

- This is a revised, strength-based assessment that is performed at intake through a one on one conversation with the parent to assess health support and information needed
- 73% of eligible children on caseload (86/118) children are enrolled in WIC
- A reciprocal referral process between NTFRC and Dr. Arth at North Lake Pediatrics has been implemented to support families that may be facing challenges surrounding their children's health.
- 62 parents participated in the health education platicas: 25 nutrition and 37 dental
- 22 parents who participated in the platicas were on the NTFRC's regular advocacy caseload
- 10 parents received both dental and nutrition education platicas

### *Nutrition*

- Please see attachment for Nutrition Survey data
- For Question #1 (Post Survey) 31/34 parents responded that they will do the suggested nutrition activities with their children which implies that their children will be more likely to receive nutritious foods.

- The high scores to Questions #1-4 (Post Survey) indicates that parents enjoyed the program, are motivated and have the best intentions to use the information they learned.
- Question #3 (Post Survey) speaks to the parents' desire to change their children's feeding habits, example: milk, juices
- Parents indicated that they have experienced growth in their knowledge in all of the question areas and intend to use the knowledge they have gained

#### *Oral Health*

- Please see attachment for Oral Health Survey
- Most participants indicated an increase in knowledge and understanding of Oral Health
- Many participants indicate a commitment to change habits and implement what they have learned with their children.
- Most parents came in with some knowledge of Oral Health and left with more
- The highest scores were around parents receiving information on calcium
- Most parents responded in the post survey that they will brush their children's teeth for 3 minutes, with the exception of one – this may be due to a lack of understanding of the survey, intimidation of the 3 minute timeframe or just an honest answer.

#### **Parent Survey**

- Please see attachment for Parent Survey data
- 30 parents that received general services (some case managed) were surveyed
- Most of the parents that received services were generally satisfied
- It is important to know the ages of the children of the parents surveyed
- There is a missing link with this survey – how does it impact the children and the overall outcome? (see next steps)

### **In what ways will we apply what we have learned from our data?**

#### **Demographics**

- Explore ways to further outreach to Caucasian families
- Look for ways to continue to outreach to North Lake Tahoe families, in particular Tahoe City and Carnelian Bay. Look at possible partnership with the 1<sup>st</sup> Baptist Church in Tahoe City and in-home child care providers in Carnelian Bay.
- In addition to English and Spanish as the primary language used in the home, explore ways to collect demographics on homes that are bilingual.

#### **Early Childhood Outcome Screens**

- Look at the newer parents vs. continuing parents being served in your data set to determine the history and impact of the services being offered
- Explore if the Outcomes Tool is still the right tool to measure how well 0-5yr olds are doing since most of them are coming in at fairly high levels (4 & 5's)

#### **Preventative Health Form**

- Discuss internally (NTFRC) about the possibility of doing a 3 month follow-up survey

#### **Parent Survey**

- Look at adding a few questions like: "how FRC services have supported you in helping your children be safe, healthy and well-nourished" or "when you utilized services, were you in need of child safety, health and nourishment" (insert outcome language into the questions). See next steps.

**Other points that were made during the conversation:**

- Please see attachment for story shared about how the NTFRC is helping a family raise a safe, healthy child

**Next Steps:**

- First 5 evaluator will re-verify the number of Nevada County vs. Placer County families being counted in the 96161 Truckee zip code
  - Add a few questions to the Parent Survey to gather better information about the achievement of the Outcome and email to First 5 evaluator for final input
  - Include a dental health box in the initial Preventative Health assessment (Welcome Form)
  - Add a question about the parent's intended fluoride usage to the Oral Health Survey
  - Collect information on how many 0-5 children are being impacted by parents participating in the placticas
- ***Next Learning Conversation: April 30, 2008 from 10-2pm in Kings Beach***